

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Marilyn Carter			Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 1320 W 11 St			Amount 1404.00	
City Jacksonville	State FL	Zip Code 32209	Transaction ID : D331216	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Marilyn Carter			Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 1320 W 11 St			Amount 1404.00	
City Jacksonville	State FL	Zip Code 32209	Transaction ID : D331217	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2808.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

Signature

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: F24N
Transaction ID :

\$9,463.36 of the in-kind contribution received from SEIU will be allocated towards non-federal candidates.

Form/Schedule:
Transaction ID:

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)
Florida Freedom PAC

FEC IDENTIFICATION NUMBER ▼

C C00521013

Check If ☐ 24-hour report ☒ 48-hour report

☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Devin Coleman

Date

MM / DD / YYYY
09 / 01 / 2012

Mailing Address 736 Odessa Street

Amount

1404.00

City State Zip Code
Jacksonville FL 32206

Transaction ID : D331218

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House ☐ Senate ☒ President
State: District:

Check One: ☒ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought 1532179.91

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Devin Coleman

Date

MM / DD / YYYY
09 / 01 / 2012

Mailing Address 736 Odessa Street

Amount

1404.00

City State Zip Code
Jacksonville FL 32206

Transaction ID : D331219

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House ☒ Senate ☐ President
State: FL District:

Check One: ☒ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BILL NELSON

Calendar Year-To-Date Per Election
for Office Sought 307824.73

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

2808.00

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

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Gihan Perera

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09 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 4 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)
Florida Freedom PAC

FEC IDENTIFICATION NUMBER ▼

C C00521013

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Keanna Hall

Date

MM / DD / YYYY

Mailing Address 10862 Natalie Dr

Amount

1404.00

City State Zip Code
Jacksonville FL 32218

Transaction ID : D331220

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House ☐ Senate ☒ President
State: _____ District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 1532179.91

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Keanna Hall

Date

MM / DD / YYYY

Mailing Address 10862 Natalie Dr

Amount

1404.00

City State Zip Code
Jacksonville FL 32218

Transaction ID : D331221

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House ☒ Senate ☐ President
State: FL District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:

BILL NELSON

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 307824.73

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

2808.00

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

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Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 5 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)
Florida Freedom PAC

FEC IDENTIFICATION NUMBER ▼

C C00521013

Check If ☐ 24-hour report ☒ 48-hour report

☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Marta Marcano

Date

MM / DD / YYYY
09 / 01 / 2012

Mailing Address 420 E Galvez Lane Apt 206

Amount

1404.00

City State Zip Code
Ponte Vedra FL 32081

Transaction ID : D331222

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House ☐ Senate ☒ President
State: _____ District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 1532179.91

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Marta Marcano

Date

MM / DD / YYYY
09 / 01 / 2012

Mailing Address 420 E Galvez Lane Apt 206

Amount

1404.00

City State Zip Code
Ponte Vedra FL 32081

Transaction ID : D331223

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House ☒ Senate ☐ President
State: FL District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:

BILL NELSON

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 307824.73

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

2808.00

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

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Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 6 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Adil McCoy		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 530 Fallen Timbers		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 1404.00 </div>
City Orange Park	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 001 </div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 1532179.91 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D331224

Full Name (Last, First, Middle Initial) of Payee Adil McCoy		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 530 Fallen Timbers		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 1404.00 </div>
City Orange Park	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 001 </div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 307824.73 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D331225

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 2808.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 2808.00 </div>

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Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 7 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)
Florida Freedom PAC

FEC IDENTIFICATION NUMBER ▼

C C00521013

Check If ☐ 24-hour report ☒ 48-hour report

☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Orlando Reyes

Date

MM / DD / YYYY

Mailing Address 5807 Ricker Road

Amount

1404.00

City State Zip Code
Jacksonville FL 32244

Transaction ID : D331226

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House ☐ Senate ☒ President
State: District:

Check One: ☒ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought 1532179.91

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Orlando Reyes

Date

MM / DD / YYYY

Mailing Address 5807 Ricker Road

Amount

1404.00

City State Zip Code
Jacksonville FL 32244

Transaction ID : D331227

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House ☒ Senate ☐ President
State: FL District:

Check One: ☒ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BILL NELSON

Calendar Year-To-Date Per Election
for Office Sought 307824.73

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

2808.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

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Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 8 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Velma Rounsville		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 3238 Sedona Trail		Amount 1404.00	
City Jacksonville	State FL	Zip Code 32208	Transaction ID : D331228
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Velma Rounsville		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 3238 Sedona Trail		Amount 1404.00	
City Jacksonville	State FL	Zip Code 32208	Transaction ID : D331229
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2808.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 9 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)
Florida Freedom PAC

FEC IDENTIFICATION NUMBER ▼

C C00521013

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Troy Squire

Date

MM / DD / YYYY

Mailing Address 1356 W 32 Street

Amount

City State Zip Code
Jacksonville FL 32209

1404.00

Transaction ID : D331230

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House ☐ Senate ☒ President
State: _____ District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
BARACK OBAMA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 1532179.91

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Troy Squire

Date

MM / DD / YYYY

Mailing Address 1356 W 32 Street

Amount

City State Zip Code
Jacksonville FL 32209

1404.00

Transaction ID : D331231

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House ☒ Senate ☐ President
State: FL District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
BILL NELSON

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 307824.73

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

2808.00

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

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Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 10 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)
Florida Freedom PAC

FEC IDENTIFICATION NUMBER ▼

C C00521013

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Cameron Starkes

Date

MM / DD / YYYY

Mailing Address 3919 Robert C Weaver Drive

Amount

1404.00

City State Zip Code
Jacksonville FL 32208

Transaction ID : D331232

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House ☐ Senate ☒ President
State: District:

Check One: ☒ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought 1532179.91

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Cameron Starkes

Date

MM / DD / YYYY

Mailing Address 3919 Robert C Weaver Drive

Amount

1404.00

City State Zip Code
Jacksonville FL 32208

Transaction ID : D331233

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House ☒ Senate ☐ President
State: FL District:

Check One: ☒ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BILL NELSON

Calendar Year-To-Date Per Election
for Office Sought 307824.73

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

2808.00

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

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Gihan Perera

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Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 11 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Venture Watkins		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 414 Fairbanks Drive		Amount 1404.00	
City Tallahassee	State FL	Zip Code 32304	Transaction ID : D331234
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Venture Watkins		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 414 Fairbanks Drive		Amount 1404.00	
City Tallahassee	State FL	Zip Code 32304	Transaction ID : D331235
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2808.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 12 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Ellis White			Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 5571 Longspur Ave			Amount 1404.00	
City Jacksonville	State FL	Zip Code 32219	Transaction ID : D331236	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Ellis White			Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 5571 Longspur Ave			Amount 1404.00	
City Jacksonville	State FL	Zip Code 32219	Transaction ID : D331237	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2808.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 13 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Corey Willborn		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 421 W Church Street Apt 716		Amount 1404.00	
City Jacksonville	State FL	Zip Code 32202	Transaction ID : D331238
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Corey Willborn		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 421 W Church Street Apt 716		Amount 1404.00	
City Jacksonville	State FL	Zip Code 32202	Transaction ID : D331239
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2808.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 14 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Maria Acevedo		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 2121 SW 2 Street Apt 7		Amount 1333.80	
City Miami	State FL	Zip Code 33135	Transaction ID : D331240
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Maria Acevedo		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 2121 SW 2 Street Apt 7		Amount 1333.80	
City Miami	State FL	Zip Code 33135	Transaction ID : D331241
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2667.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 15 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)
Florida Freedom PAC

FEC IDENTIFICATION NUMBER ▼

C C00521013

Check If ☐ 24-hour report ☒ 48-hour report

☒ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

Maria Acevedo

Date

M M M / D D D / Y Y Y Y Y Y
09 / 01 / 2012

Mailing Address 2121 SW 2 Street Apt 7

Amount

140.40

City State Zip Code
Miami FL 33135

Transaction ID : D331242

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☒ House State: FL
☐ Senate District: 26
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

JOE GARCIA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought

6446.60

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Lubby Arguello

Date

M M M / D D D / Y Y Y Y Y Y
09 / 01 / 2012

Mailing Address 1567 SW 4 Street Apt 10

Amount

1333.80

City State Zip Code
Miami FL 33135

Transaction ID : D331243

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House State:
☐ Senate District:
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought

1532179.91

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

1474.20

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 16 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Lubby Arguello		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y Y Y </div>
Mailing Address 1567 SW 4 Street Apt 10		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1333.80 </div>
City Miami State FL Zip Code 33135	Transaction ID : D331244	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30	Category/Type 001	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee Lubby Arguello		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y Y Y </div>
Mailing Address 1567 SW 4 Street Apt 10		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 140.40 </div>
City Miami State FL Zip Code 33135	Transaction ID : D331245	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 6446.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1474.20 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y Y Y
 09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 17 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Marie Camy			Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 2131 NE Miami Gardens Drive			Amount 1333.80	
City North Miami Beach	State FL	Zip Code 33179	Transaction ID : D331246	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Marie Camy			Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 2131 NE Miami Gardens Drive			Amount 1333.80	
City North Miami Beach	State FL	Zip Code 33179	Transaction ID : D331247	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2667.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 18 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)
Florida Freedom PAC

FEC IDENTIFICATION NUMBER ▼

C C00521013

Check If ☐ 24-hour report ☒ 48-hour report

☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Marie Camy

Date

MM / DD / YYYY
09 / 01 / 2012

Mailing Address 2131 NE Miami Gardens Drive

Amount

140.40

City State Zip Code
North Miami Beach FL 33179

Transaction ID : D331248

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☒ House State: FL
☐ Senate District: 26
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

JOE GARCIA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought

6446.60

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Lawrence Cuervo

Date

MM / DD / YYYY
09 / 01 / 2012

Mailing Address 15705 Miami Lakeway N

Amount

1333.80

City State Zip Code
Miami Lakes FL 33014

Transaction ID : D331249

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House State:
☐ Senate District:
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought

1532179.91

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

1474.20

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 19 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Lawrence Cuervo		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 15705 Miami Lakeway N		Amount 1333.80	
City Miami Lakes	State FL	Zip Code 33014	Transaction ID : D331250
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Lawrence Cuervo		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 15705 Miami Lakeway N		Amount 140.40	
City Miami Lakes	State FL	Zip Code 33014	Transaction ID : D331251
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6446.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1474.20
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 20 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)
Florida Freedom PAC

FEC IDENTIFICATION NUMBER ▼

C C00521013

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Marie Fleurime

Date

MM / DD / YYYY

Mailing Address 51 NE 128 Street

Amount

1333.80

City State Zip Code
North Miami FL 33161

Transaction ID : D331252

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House ☐ Senate ☒ President
State: District:

Check One: ☒ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought 1532179.91

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Marie Fleurime

Date

MM / DD / YYYY

Mailing Address 51 NE 128 Street

Amount

1333.80

City State Zip Code
North Miami FL 33161

Transaction ID : D331253

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House ☒ Senate ☐ President
State: FL District:

Check One: ☒ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BILL NELSON

Calendar Year-To-Date Per Election
for Office Sought 307824.73

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

2667.60

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 21 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00521013</div>	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div>			

Full Name (Last, First, Middle Initial) of Payee Marie Fleurime		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y 09 / 01 / 2012</div>	
Mailing Address 51 NE 128 Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">140.40</div>	
City North Miami	State FL	Zip Code 33161	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">6446.60</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Keren Frederick		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y 09 / 01 / 2012</div>	
Mailing Address 1341 NE 143 Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1333.80</div>	
City Miami	State FL	Zip Code 33161	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1532179.91</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1474.20</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature _____ Date

M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 22 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Keren Frederick		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 5px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 1341 NE 143 Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 1333.80 </div>
City Miami State FL Zip Code 33161	Transaction ID : D331256	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 307824.73 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Keren Frederick		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 5px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 1341 NE 143 Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 140.40 </div>
City Miami State FL Zip Code 33161	Transaction ID : D331257	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 6446.60 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; width: 100%;">1474.20</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

 09 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 23 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Rochelle Jackson		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address PO Box 380265		Amount 1333.80	
City Miami	State FL	Zip Code 33238	Transaction ID : D331258
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rochelle Jackson		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address PO Box 380265		Amount 1333.80	
City Miami	State FL	Zip Code 33238	Transaction ID : D331259
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2667.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 24 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)
Florida Freedom PAC

FEC IDENTIFICATION NUMBER ▼

C C00521013

Check If ☐ 24-hour report ☒ 48-hour report

☒ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

Rochelle Jackson

Date

09 / 01 / 2012

Mailing Address PO Box 380265

Amount

140.40

City State Zip Code
Miami FL 33238

Transaction ID : D331260

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☒ House State: FL
☐ Senate District: 26
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

JOE GARCIA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 6446.60

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Johann Joseph

Date

09 / 01 / 2012

Mailing Address 2131 NE Miami Gardens Drive

Amount

1333.80

City State Zip Code
North miami Beach FL 33179

Transaction ID : D331261

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House State:
☐ Senate District:
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 1532179.91

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

1474.20

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

09 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 25 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Johann Joseph		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 2131 NE Miami Gardens Drive		Amount 1333.80	
City North miami Beach	State FL	Zip Code 33179	Transaction ID : D331262
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Johann Joseph		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 2131 NE Miami Gardens Drive		Amount 140.40	
City North miami Beach	State FL	Zip Code 33179	Transaction ID : D331263
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6446.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1474.20
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 26 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Harold Pendas		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 1222 NW 58 ST		Amount 1333.80	
City Miami	State FL	Zip Code 33142	Transaction ID : D331264
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Harold Pendas		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 1222 NW 58 ST		Amount 1333.80	
City Miami	State FL	Zip Code 33142	Transaction ID : D331265
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2667.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 27 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y			
Full Name (Last, First, Middle Initial) of Payee Harold Pendas		Date M M / D D / Y Y Y Y Y Y Y Y 09 / 01 / 2012	
Mailing Address 1222 NW 58 ST		Amount 140.40	
City Miami	State FL	Zip Code 33142	Transaction ID : D331266
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6446.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Rossana Torres		Date M M / D D / Y Y Y Y Y Y Y Y 09 / 01 / 2012	
Mailing Address 8820 Fontainebleau Blvd Apt 206		Amount 1333.80	
City Miami	State FL	Zip Code 33172	Transaction ID : D331267
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		1474.20	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures.....			
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Gihan Perera</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date M M / D D / Y Y Y Y Y Y Y Y 09 / 03 / 2012</p>			

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 28 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)
Florida Freedom PAC

FEC IDENTIFICATION NUMBER ▼

C C00521013

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Rossana Torres

Date

MM / DD / YYYY

Mailing Address 8820 Fontainebleau Blvd Apt 206

Amount

1333.80

City State Zip Code
Miami FL 33172

Transaction ID : D331268

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House State: FL
☒ Senate District:
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BILL NELSON

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 307824.73

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Rossana Torres

Date

MM / DD / YYYY

Mailing Address 8820 Fontainebleau Blvd Apt 206

Amount

140.40

City State Zip Code
Miami FL 33172

Transaction ID : D331269

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☒ House State: FL
☐ Senate District: 26
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

JOE GARCIA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 6446.60

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

1474.20

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 29 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Louikens Toussaint		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 429 NW 84 Terrace		Amount 1333.80	
City Miami	State FL	Zip Code 33150	Transaction ID : D331270
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Louikens Toussaint		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 429 NW 84 Terrace		Amount 1333.80	
City Miami	State FL	Zip Code 33150	Transaction ID : D331271
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2667.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 30 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Louikens Toussaint		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 429 NW 84 Terrace		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 140.40 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 6446.60 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D331272

Full Name (Last, First, Middle Initial) of Payee Maria Zavala		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 12641 Sw 35 Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 1333.80 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 1532179.91 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D331273

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 1474.20 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 1474.20 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 31 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)
Florida Freedom PAC

FEC IDENTIFICATION NUMBER ▼

C C00521013

Check If ☐ 24-hour report ☒ 48-hour report

☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Maria Zavala

Date

MM / DD / YYYY

Mailing Address 12641 Sw 35 Street

Amount

1333.80

City State Zip Code
Miami FL 33175

Transaction ID : D331274

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House State: FL
☒ Senate District:
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BILL NELSON

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought

307824.73

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Maria Zavala

Date

MM / DD / YYYY

Mailing Address 12641 Sw 35 Street

Amount

140.40

City State Zip Code
Miami FL 33175

Transaction ID : D331275

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☒ House State: FL
☐ Senate District: 26
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

JOE GARCIA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought

6446.60

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

1474.20

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

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Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 32 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)
Florida Freedom PAC

FEC IDENTIFICATION NUMBER ▼

C C00521013

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Pilar Burgos

Date

MM / DD / YYYY

Mailing Address 4214 Pershing Pointe Place #3

Amount

1333.80

City State Zip Code
Orlando FL 32822

Transaction ID : D331276

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House ☐ Senate ☒ President
State: _____ District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 1532179.91

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Pilar Burgos

Date

MM / DD / YYYY

Mailing Address 4214 Pershing Pointe Place #3

Amount

1333.80

City State Zip Code
Orlando FL 32822

Transaction ID : D331277

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House ☒ Senate ☐ President
State: FL District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:

BILL NELSON

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 307824.73

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

2667.60

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 33 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Linda Echeverria		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 11305 Spining Reel		Amount 1333.80	
City Orlando	State FL	Zip Code 32852	Transaction ID : D331278
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Linda Echeverria		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 11305 Spining Reel		Amount 1333.80	
City Orlando	State FL	Zip Code 32852	Transaction ID : D331279
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2667.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

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Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 34 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Justin Conner Jones		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 2115 River Tree Circle		Amount 1333.80	
City Orlando	State FL	Zip Code 32839	Transaction ID : D331280
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Justin Conner Jones		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 2115 River Tree Circle		Amount 1333.80	
City Orlando	State FL	Zip Code 32839	Transaction ID : D331281
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2667.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Gihan Perera

Signature

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Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 35 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Cartine Obas		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 2544 Robert Trent Jones Drive Unit		Amount 1333.80	
City Orlando	State FL	Zip Code 32835	Transaction ID : D331282
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Cartine Obas		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 2544 Robert Trent Jones Drive Unit		Amount 1333.80	
City Orlando	State FL	Zip Code 32835	Transaction ID : D331283
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2667.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 36 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Gabriela Ortega		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 3732 Aldergate Pl.		Amount 1333.80	
City Casselberry	State FL	Zip Code 32707	Transaction ID : D331284
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Gabriela Ortega		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 3732 Aldergate Pl.		Amount 1333.80	
City Casselberry	State FL	Zip Code 32707	Transaction ID : D331285
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2667.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 37 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Eric Pagan		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M / D D / Y Y Y Y Y Y 09 / 01 / 2012 </div>
Mailing Address 290 Augustine Ct.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 1333.80 </div>
City Oviedo	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 1532179.91 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D331286

Full Name (Last, First, Middle Initial) of Payee Eric Pagan		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M / D D / Y Y Y Y Y Y 09 / 01 / 2012 </div>
Mailing Address 290 Augustine Ct.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 1333.80 </div>
City Oviedo	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 307824.73 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D331287

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 2667.60 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> 2667.60 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M M / D D D / Y Y Y Y Y Y
 09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 38 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)
Florida Freedom PAC

FEC IDENTIFICATION NUMBER ▼

C C00521013

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Diego Renteria

Date

MM / DD / YYYY

Mailing Address 430 Green Spring Circle

Amount

1333.80

City State Zip Code
Winter Springs FL 32708

Transaction ID : D331288

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House ☐ Senate ☒ President
State: _____ District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 1532179.91

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Diego Renteria

Date

MM / DD / YYYY

Mailing Address 430 Green Spring Circle

Amount

1333.80

City State Zip Code
Winter Springs FL 32708

Transaction ID : D331289

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House ☒ Senate ☐ President
State: FL District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:

BILL NELSON

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 307824.73

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

2667.60

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

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Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 39 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Audeliz Sanchez		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 3104 Orchard Place		Amount 1333.80	
City Kissimmee	State FL	Zip Code 34743	Transaction ID : D331290
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Audeliz Sanchez		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 3104 Orchard Place		Amount 1333.80	
City Kissimmee	State FL	Zip Code 34743	Transaction ID : D331291
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2667.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Gihan Perera

Signature

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Date

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09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 40 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y			

Full Name (Last, First, Middle Initial) of Payee Damon Taylor		Date M M / D D / Y Y Y Y Y Y Y Y 09 / 01 / 2012	
Mailing Address 10 Eaton Street		Amount 1333.80	
City Eatonville	State FL	Zip Code 32751	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Transaction ID : D331292	

Full Name (Last, First, Middle Initial) of Payee Damon Taylor		Date M M / D D / Y Y Y Y Y Y Y Y 09 / 01 / 2012	
Mailing Address 10 Eaton Street		Amount 1333.80	
City Eatonville	State FL	Zip Code 32751	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Transaction ID : D331293	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2667.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Gihan Perera

[Electronically Filed]

Signature _____ Date M M / D D / Y Y Y Y Y Y Y Y
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 41 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Antrenic Williams		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 3070 Malcolm Drive		Amount 1333.80	
City Deltona	State FL	Zip Code 32738	Transaction ID : D331294
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Antrenic Williams		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 3070 Malcolm Drive		Amount 1333.80	
City Deltona	State FL	Zip Code 32738	Transaction ID : D331295
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2667.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 42 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Dionne Allen			Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 12303 Bohannon Blvd			Amount 1319.76	
City Orlando	State FL	Zip Code 32824	Transaction ID : D331297	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Dionne Allen			Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 12303 Bohannon Blvd			Amount 1319.76	
City Orlando	State FL	Zip Code 32824	Transaction ID : D331298	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2639.52
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 43 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y			
Full Name (Last, First, Middle Initial) of Payee Dionne Allen		Date M M / D D / Y Y Y Y Y Y 09 / 01 / 2012	
Mailing Address 12303 Bohannon Blvd		Amount 28.08	
City Orlando	State FL	Zip Code 32824	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1205.08		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Alexis Cartland		Date M M / D D / Y Y Y Y Y Y 09 / 01 / 2012	
Mailing Address 6492 Emerald Dunes Drive # 305		Amount 1319.76	
City West Palm Beach	State FL	Zip Code 33411	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		1347.84	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures.....			
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Gihan Perera</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date M M / D D / Y Y Y Y Y Y 09 / 03 / 2012</p>			

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)
Florida Freedom PAC

FEC IDENTIFICATION NUMBER ▼

C C00521013

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Alexis Cartland

Date

MM / DD / YYYY

Mailing Address 6492 Emerald Dunes Drive # 305

Amount

1319.76

City State Zip Code
West Palm Beach FL 33411

Transaction ID : D331301

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House State: FL
☒ Senate District:
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BILL NELSON

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 307824.73

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Alexis Cartland

Date

MM / DD / YYYY

Mailing Address 6492 Emerald Dunes Drive # 305

Amount

28.08

City State Zip Code
West Palm Beach FL 33411

Transaction ID : D331302

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☒ House State: FL
☐ Senate District: 18
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK MURPHY

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 1205.08

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

1347.84

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 45 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Kathy Dent		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 1834 SE Aneci Street		Amount 1319.76	
City Port Saint Lucie	State FL	Zip Code 34983	Transaction ID : D331303
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Kathy Dent		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 1834 SE Aneci Street		Amount 1319.76	
City Port Saint Lucie	State FL	Zip Code 34983	Transaction ID : D331304
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2639.52
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Kathy Dent		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 1834 SE Aneci Street		Amount 28.08	
City Port Saint Lucie	State FL	Zip Code 34983	Transaction ID : D331305
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1205.08		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Sandy Hector		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 4330 Village Drive #B		Amount 1319.76	
City Delray	State FL	Zip Code 33445	Transaction ID : D331306
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1347.84
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 47 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)
Florida Freedom PAC

FEC IDENTIFICATION NUMBER ▼

C C00521013

Check If ☐ 24-hour report ☒ 48-hour report

☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Sandy Hector

Date

MM / DD / YYYY
09 / 01 / 2012

Mailing Address 4330 Village Drive #B

Amount

1319.76

City State Zip Code
Delray FL 33445

Transaction ID : D331307

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House State: FL
☒ Senate District:
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BILL NELSON

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought

307824.73

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Sandy Hector

Date

MM / DD / YYYY
09 / 01 / 2012

Mailing Address 4330 Village Drive #B

Amount

28.08

City State Zip Code
Delray FL 33445

Transaction ID : D331308

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☒ House State: FL
☐ Senate District: 18
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

PATRICK MURPHY

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought

1205.08

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

1347.84

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 48 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Tony Patterson		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 1638 Bresee Road		Amount 1319.76	
City West Palm Beach	State FL	Zip Code 33415	Transaction ID : D331309
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tony Patterson		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 1638 Bresee Road		Amount 1319.76	
City West Palm Beach	State FL	Zip Code 33415	Transaction ID : D331310
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2639.52
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 49 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y			

Full Name (Last, First, Middle Initial) of Payee Tony Patterson		Date M M / D D / Y Y Y Y Y Y Y Y 09 / 01 / 2012	
Mailing Address 1638 Bresee Road		Amount 28.08	
City West Palm Beach	State FL	Zip Code 33415	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1205.08		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Robert Richardson		Date M M / D D / Y Y Y Y Y Y Y Y 09 / 01 / 2012	
Mailing Address 2352 Z Terrace		Amount 1319.76	
City Riviera Beach	State FL	Zip Code 33404	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1347.84
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature _____ Date M M / D D / Y Y Y Y Y Y Y Y
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 50 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Robert Richardson		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 2352 Z Terrace		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 1319.76 </div>
City Riviera Beach	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 001 </div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 307824.73 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D331313

Full Name (Last, First, Middle Initial) of Payee Robert Richardson		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 2352 Z Terrace		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 28.08 </div>
City Riviera Beach	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 001 </div>
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 1205.08 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D331314

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 1347.84 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 1347.84 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 51 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Yettie Thompkins			Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 414 Lincoln Rd.			Amount 1319.76	
City Cocoa	State FL	Zip Code 32926	Transaction ID : D331315	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Yettie Thompkins			Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 414 Lincoln Rd.			Amount 1319.76	
City Cocoa	State FL	Zip Code 32926	Transaction ID : D331316	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2639.52
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 52 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Yettie Thompkins			Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 414 Lincoln Rd.			Amount 28.08	
City Cocoa	State FL	Zip Code 32926	Transaction ID : D331317	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18	
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1205.08			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee John Tracey			Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 2812 Genessee Ave			Amount 1319.76	
City West Palm Beach	State FL	Zip Code 33409	Transaction ID : D331318	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1347.84
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 53 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y			
Full Name (Last, First, Middle Initial) of Payee John Tracey		Date M M / D D / Y Y Y Y Y Y Y Y 09 / 01 / 2012	
Mailing Address 2812 Genessee Ave		Amount 1319.76	
City West Palm Beach	State FL	Zip Code 33409	Transaction ID : D331319
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee John Tracey		Date M M / D D / Y Y Y Y Y Y Y Y 09 / 01 / 2012	
Mailing Address 2812 Genessee Ave		Amount 28.08	
City West Palm Beach	State FL	Zip Code 33409	Transaction ID : D331320
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1205.08		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		1347.84	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures.....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>Gihan Perera</u> <div style="text-align: right;">[Electronically Filed]</div>		Date M M / D D / Y Y Y Y Y Y Y Y 09 / 03 / 2012	

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Frankisha Walker		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 3414 34th Way		Amount 1319.76	
City West Palm Beach	State FL	Zip Code 33407	Transaction ID : D331321
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Frankisha Walker		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 3414 34th Way		Amount 1319.76	
City West Palm Beach	State FL	Zip Code 33407	Transaction ID : D331322
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2639.52
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Frankisha Walker		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 3414 34th Way		Amount 28.08	
City West Palm Beach	State FL	Zip Code 33407	Transaction ID : D331323
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1205.08		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Carol Brown		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 3909 LaSalle Street		Amount 1404.00	
City Tampa	State FL	Zip Code 33607	Transaction ID : D331324
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1432.08
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)
Florida Freedom PAC

FEC IDENTIFICATION NUMBER ▼

C C00521013

Check If ☐ 24-hour report ☒ 48-hour report

☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Carol Brown

Date

MM / DD / YYYY

Mailing Address 3909 LaSalle Street

Amount

1404.00

City State Zip Code
Tampa FL 33607

Transaction ID : D331325

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House State: FL
☒ Senate District:
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BILL NELSON

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought

307824.73

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Alissah Depiro

Date

MM / DD / YYYY

Mailing Address 3721 Mission Court

Amount

1404.00

City State Zip Code
Largo FL 33771

Transaction ID : D331326

Purpose of Expenditure
Estimated payment for salary and benefits from 9/1-9/30

Category/
Type 001

Office Sought: ☐ House State:
☐ Senate District:
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought

1532179.91

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

2808.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y			

Full Name (Last, First, Middle Initial) of Payee Alissah Depiro			Date M M / D D / Y Y Y Y Y Y Y Y 09 / 01 / 2012	
Mailing Address 3721 Mission Court			Amount 1404.00	
City Largo	State FL	Zip Code 33771		
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Estefania Galvis			Date M M / D D / Y Y Y Y Y Y Y Y 09 / 01 / 2012	
Mailing Address 10811 N Mc Kinley Dr.			Amount 1404.00	
City Tampa	State FL	Zip Code 33612		
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2808.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Signature _____ Date M M / D D / Y Y Y Y Y Y Y Y
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Estefania Galvis		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 10811 N Mc Kinley Dr.		Amount 1404.00	
City Tampa	State FL	Zip Code 33612	Transaction ID : D331329
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Diego Guerra		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 3408 W Reynolds St.		Amount 1404.00	
City Plant City	State FL	Zip Code 33563	Transaction ID : D331330
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2808.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Diego Guerra		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 3408 W Reynolds St.		Amount 1404.00	
City Plant City	State FL	Zip Code 33563	Transaction ID : D331331
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Stephen Radcliff		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 6753 Ralston Beach Circle		Amount 1404.00	
City Tampa	State FL	Zip Code 33614	Transaction ID : D331332
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2808.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Stephen Radcliff		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 6753 Ralston Beach Circle		Amount 1404.00	
City Tampa	State FL	Zip Code 33614	Transaction ID : D331333
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Arthur Smith		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 9 Iverness Rd.		Amount 1404.00	
City Scardale	State NY	Zip Code 10583	Transaction ID : D331334
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2808.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Arthur Smith			Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 9 Iverness Rd.			Amount 1404.00	
City Scardale	State NY	Zip Code 10583	Transaction ID : D331335	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Gonzalo Valdes			Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 8003 N Rome Avenue			Amount 1404.00	
City Tampa	State FL	Zip Code 33604	Transaction ID : D331336	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2808.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Gonzalo Valdes		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 8003 N Rome Avenue		Amount 1404.00	
City Tampa	State FL	Zip Code 33604	Transaction ID : D331337
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Charles Jefferson		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 8515 River Drive		Amount 1404.00	
City Tampa	State FL	Zip Code 33615	Transaction ID : D331338
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2808.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 63 OF 70
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ C C00521013
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Charles Jefferson			Date M M / D D / Y Y Y Y Y Y Y Y 09 / 01 / 2012	
Mailing Address 8515 River Drive			Amount 1404.00	
City Tampa	State FL	Zip Code 33615	Transaction ID : D331339	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Jonathan Romero			Date M M / D D / Y Y Y Y Y Y Y Y 09 / 01 / 2012	
Mailing Address 1101 Arboleda Court			Amount 1404.00	
City Tampa	State FL	Zip Code 33664	Transaction ID : D331340	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2808.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

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Date

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09 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Jonathan Romero		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 1101 Arboleda Court		Amount 1404.00	
City Tampa	State FL	Zip Code 33664	Transaction ID : D331341
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Mable Smith		Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 4203 Arch		Amount 1404.00	
City Tampa	State FL	Zip Code 33607	Transaction ID : D331342
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2808.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Gihan Perera

Signature

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y			
Full Name (Last, First, Middle Initial) of Payee Mable Smith		Date M M / D D / Y Y Y Y Y Y 09 / 01 / 2012	
Mailing Address 4203 Arch		Amount 1404.00	
City Tampa	State FL	Zip Code 33607	Transaction ID : D331343
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Muslim Ali		Date M M / D D / Y Y Y Y Y Y 09 / 01 / 2012	
Mailing Address 6513 Yellow Hammer Ave		Amount 1404.00	
City Tampa	State FL	Zip Code 33025	Transaction ID : D331344
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		2808.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures.....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>Gihan Perera</u> <div style="text-align: right;">[Electronically Filed]</div>		Date M M / D D / Y Y Y Y Y Y 09 / 03 / 2012	

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Muslim Ali			Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 6513 Yellow Hammer Ave			Amount 1404.00	
City Tampa	State FL	Zip Code 33025	Transaction ID : D331345	
Purpose of Expenditure Estimated payment for salary and benefits from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Florida New Majority			Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 8330 Biscayne Blvd. Suite 1			Amount 1457.81	
City Miami	State FL	Zip Code 33138	Transaction ID : D331357	
Purpose of Expenditure Est. Cost - Food for Canvassers from 9/1-9/30		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2861.81
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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09 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Florida New Majority		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 09 / 01 / 2012 </div>
Mailing Address 8330 Biscayne Blvd. Suite 1		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1457.80 </div>
City Miami State FL Zip Code 33138		
Purpose of Expenditure Est. Cost - Food for Canvassers from 9/1-9/30	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">307824.73</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D331358

Full Name (Last, First, Middle Initial) of Payee Florida New Majority		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 09 / 01 / 2012 </div>
Mailing Address 8330 Biscayne Blvd. Suite 1		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 30.12 </div>
City Miami State FL Zip Code 33138		
Purpose of Expenditure Est. Cost - Food for Canvassers from 9/1-9/30	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">6446.60</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D331359

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1487.92</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Signature

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Florida New Majority			Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 8330 Biscayne Blvd. Suite 1			Amount 6.02	
City Miami	State FL	Zip Code 33138	Transaction ID : D331360	
Purpose of Expenditure Est. Cost - Food for Canvassers from 9/1-9/30		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18	
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1205.08			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee SERVICE EMPLOYEES INTERNATIONAL UNION PEA-FEDERAL			Date MM / DD / YYYY 09 / 01 / 2012	
Mailing Address 1800 MASSACHUSETTS AVENUE NW			Amount 229013.49	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : D331361	
Purpose of Expenditure In-Kind: Est. payment for salary and other canvass-related expenses from 9/1-9/30/12		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1532179.91			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	229019.51
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y			
Full Name (Last, First, Middle Initial) of Payee SERVICE EMPLOYEES INTERNATIONAL UNION PEA-FEDERAL		Date M M / D D / Y Y Y Y Y Y Y Y 09 / 01 / 2012	
Mailing Address 1800 MASSACHUSETTS AVENUE NW		Amount 229013.49	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : D331362
Purpose of Expenditure In-Kind: Est. payment for salary and other canvass-related expenses from 9/1-9/30/12		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 307824.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Full Name (Last, First, Middle Initial) of Payee SERVICE EMPLOYEES INTERNATIONAL UNION PEA-FEDERAL		Date M M / D D / Y Y Y Y Y Y Y Y 09 / 01 / 2012	
Mailing Address 1800 MASSACHUSETTS AVENUE NW		Amount 4731.68	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : D331363
Purpose of Expenditure In-Kind: Est. payment for salary and other canvass-related expenses from 9/1-9/30/12		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6446.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		233745.17	
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶			
(c) TOTAL Independent Expenditures.....▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature Gihan Perera		Date M M / D D / Y Y Y Y Y Y Y Y 09 / 03 / 2012	
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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee SERVICE EMPLOYEES INTERNATIONAL UNION PEA-FEDERAL		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 09 / 01 / 2012 </div>
Mailing Address 1800 MASSACHUSETTS AVENUE NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 946.34 </div>
City WASHINGTON	State DC	
Purpose of Expenditure In-Kind: Est. payment for salary and other canvass-related expenses from 9/1-9/30/12		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 001 </div>
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1205.08 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D331364

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> / / </div>
City	State	Zip Code
Purpose of Expenditure		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 946.34 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 615621.15 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 615621.15 </div>

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Gihan Perera

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Date

Signature

09 / 03 / 2012